An

Inaugural Thesis
on

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W. R. He.

Hypochondriasis

By

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Hypochondriasis.

This disease as will readily be supposed not less from the causes which are known to produce it, than from the peculiarities of its nature, must have been noticed from the earliest times; and like many others has been handed down through the clamour and confusion of medical revolutions still wearing the garb of uncertainty. The opinions of disease entertained by the first cultivators of physic must necessarily have been founded much on the broad basis of speculation and hypothesis, and in viewing the list of diseases, and their gradual development from their original state of uncertainty, to the far more correct and established notions of modern times, we find but few that have opened a wider

field for the production of new and fanciful theories than hypochondriasis. — This name by general consent is given to a disease principally characterized by an anxious and apprehensive state of mind in respect to the patients health, and by an imaginary suffering of many morbid affec=tions, together with a derangement of some of the Chylopoietic Viscera, generally the stomach. The name given to this affection is generally believed to have originated in the uneasy sensations which hypochondriacs feel in that region of the abdomen called by anato=mists the hypochondria: in support of the opinion that this name was given to the dis=ease as indicative of its seat, it was called Miachia by the Arabians from Miach the abdomen or belly; the opinion once pre=valent that the spleen was the seat of the

disease, gave occasion to the use of the name of that Viscus to designate the disorder, and the opinion that this singular affection of the Mind originated in Vapours arising from a collection of feculent and offensive Matter in the Spleen and first passages gave origin to the term - Vapours.

It would be impossible to give a regular detail of all the symptoms of a disease so varying and uncertain in its phenomena as hypochondriasis; on this subject we hope it will suffice to say, that after a series of symptoms evincing a deranged state of the bodily health generally, but particularly of the organs of digestion, a state of Mind succeeds marked by the following symptoms, languor, a want of resolution in all undertakings, a sadness and timidity, a constant dread of evil, and of the most unhappy consequences from the

very slightest grounds; the patient fancies him=
=self afflicted with every disorder, and is
displeased with any person who would
persuade him to the contrary; and finally
if not arrested in its progress, a depraved imag=
=ination arises productive of the most sing=
=ular sensations and erroneous ideas.
This disease occurs principally in advanc=
=ed life and persons of a melancholic
temperament are peculiarly liable to it;
the habits and occupation have also great
influence in the propagation of the disorder;
those leading sedentary lives, the studious
as well as the indolent and the idle are
apt to be the subjects of its influence; one
great peculiarity of this disease, is its
rapid progress when once established; it
at first appears to consist only in a wrong
or mistaken idea which unless timely

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connected soon multiplies, and ultimately ends in a depraved and vitiated imagination which big with the most awful forebodings load the sufferer with great distress and misery; it is said that hypochondriacs are worse in autumn and in winter than in the other seasons of the year, in some measure I suppose, the effect of an impression made on the mind by a view of the surrounding objects, for the sudden change of the beauties of spring into the gloomy and desolated show of winter is certainly were calculated to fill the mind with solemn and melancholy thoughts.
After a continuance of this course of things viz. the dejection of spirits, the great care of their health, anxiety as to all their concerns, as were as to every sensation, for an indefinite period, diseased perceptions arise in

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which they form the most unreasonable notions and to which they adhere with the thickest pertinacity; some like the painter described by Tulpius supposing themselves made of a fragile substance liable to be broken by the slightest touch, while others like the baker of Marcus Donatus fear to stand erect lest their legs bend under them; with these and many other notions equally chimerical strongly rivited in their minds they cannot but suffer the greatest anxiety. In others the disease verges on melancholy and in these cases we sometimes meet with suicide.

In hypochondrias as well as in many other diseases there is much discrepancy of opinion among writers as regards its real nature; but as regards the correctness of their respective views of the pathology of the disease I shall say nothing, and only notice some

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of the principal. It has been observed by all writers on the disease that it is invariably connected with more or less derangement of of some one of the chylopoietic Viscera, and it is this observation which has probably given rise to the different opinions which has existed relative to its nature.

Some suppose the disease the disease to depend on a direct loss of sensorial power induced by various remote causes, as the remembrance of some important loss or disappointment, close study, excessive venery, sedentary habits, long continued evacuations &c. and that the affections of the abdominal viscera which are concomitant and generally viewed in the relation of causes are but symptomatic; they believe that the disponding passions are for the most part the exciting causes, acting through the medium

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of the brain, and this they adduce as an argument in favour of the idiopathic nature of the disease, or rather of the mental affection. Cullen whose doctrines and opinions are viewed as the standard of modern times believed that this state of mind is invari-ably connected with an affection of the stomach. but at the same time he says that dyspepsia is equally sure to be attend-ed with a certain affection of the mind; he is far however from confounding the two diseases for he believes the gastric affection in hypochondriasis to be entirely different from dyspepsia; in order then for the author above quoted to distinguish the two diseases and arrive at a certainty of the existance of hypochondriasis he has particular reference to the age and temperament of the patient; he thinks this

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disease almost exclusively confined to those advanced in life and of a melancholic temperament. While dyspepsia generally occurs in the vigour of life and to those of a sanguine temperament; these mental variations attending the dyspepsia of sanguine temperaments, he thinks are for the most part slight, and on the other hand in the disease as it occurs in the melancholic the gastric symptoms are equally slight and more dependant on the temperament; he thinks also that the state of mind is different in the two cases, and that when the mental affection of the young and sanguine resembles the disease he would call hypochondriasis, it must be attributed to a debilitated and changeable state of the nervous powers." In a word it is the opinion of Dr. Cullen that hypochondriasis is perhaps always a primary and idiopathic disease.

Others believe that the source of the mental illusion is confined to the abdomen, and that the disagreeable feelings, dejection of spirits disordered perceptions and strange ideas are merely the offspring of impressions transmitted to the brain from an uneasiness in the stom=ach and bowels; and this position they support by the well known fact that the disease as=sumes a much more troublesome type when the patients are troubled with indigestion flat=ulency, colic, and the like. It is said by Doctr. Whytt that the faintings, tumors, palpitations of the heart, and even the jealousy which attend the disease, may be more frequently owing to the infirm state of the primæ viæ than to any defect either in the brain or heart. This evidently appears to be the most plausible doctrine of the nature of this disease yet it must be acknowledged that it is not

easy to trace the erroneous perceptions of an hypochondriac to the original yet painful sensations in the body.

Among the supporters of this opinion concerning the pathology of hypochondriasis viz. that it has its origin in some of the abdominal viscera may be mentioned the name of Crichton the author of "An Inquiry into the origin and nature of Mental Derangement." This author in accounting for the progress of the disease from its first symptoms and most simple form, to its full developement and most aggravated shape says "A firm belief in any perception never takes place unless it acquires a certain degree of force, and as all the impressions which arise from the viscera of the abdomen are necessarily obscure we see the reason why there must continue for a certain length of time or be often repeated

before they can draw a persons attention from the ordinary impressions of external objects which are clear and distinct. and before they acquire such a degree of vividness as to destroy the operations of reason:- That this unhappy state of mind denominated hypochondriasis is occasioned by some disordered state of the abdominal Viscera, and most generally of the stomach appears to be the popular doc= =trine of the present day, and in fact a late *writer has gone so far as to say "that hypo= =chondriasis is as truly a gastric disease as any to which our systems are liable", he also goes farther and denies the existence of any mental disease whatever as purely idiopathic If then this affection of the mind has its seat in the stomach or other of the abdominal Viscera we are necessarily led to enquire into the nature of this diseased state of the viscera.

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and as we frequently see the stomach much disordered by indigestion and other diseases, the mind at the same time being unimpaired, it can only be ascribed to an impression sui generis. Causes. Notwithstanding the difference of opinion which has existed as respects the nature of the diseased action, almost all agree in ascribing it to the same remote causes, among which as the principal we may mention, close study, great anxiety, for the attainment of some important end or object, excessive venery, sedentary habits, a constant recollection of some material loss or disappointment, improper diet, long continued evacuations, to which has been added intermittent and remittent fevers.

To enumerate or mention the proximate cause of the disease, would only be to recapitulate the different views that I have before mentioned that different authors have entertained of its

pathology; it is perhaps sufficient to observe that a Majority of Physicians from the earli=
=est times have coincided in referring the original seat of hypochondriasis to a prim=
=ary affection of some one of the abdominal viscera, but of the precise nature of the affection we are as yet ignorant.

Diagnosis. In distinguishing this disease we are most liable to confound it with either dyspepsia, hysteria or Melancholia, there being certain symptoms similar in, and nearly common to each. To distinguish hypochondriasis from dyspepsia, we may at first have recourse to the age of the patient, as it is said that the former is almost exclusively confined to advanced life, whilst the latter occurs principally from the age of puberty to that of thirty five; the fear of death and constant dread

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of evil may also be regarded as an important diagnostic symptom. Cullen distinguished the two diseases principally by the peculiar temperament of the patient, of which I have before spoken. - By many of the old writers hypochondriasis and hysteria were considered as one and the same disease, differing only as the delicate frame and constitution of the female differs from the more hardy and robust nature of the male, but these are now considered as distinct diseases, first I believe noticed as such by the learned and distinguished Fred. Hoffman: the spirits of the patients in the two diseases before us afford the most satisfactory line of distinction: in hypochondriasis as has before been said the mind is fixed in gloom and sadness, exhibiting every appearance of the utmost dejection and sorrow, whilst in hysteria the spirits are

often gay and buoyant, and bearing the countenance of mirth and hilarity.

Hypochondriasis may be distinguished from Melancholia by the gastric affection which is almost always its concomitant, whereas in Melancholia it is but rarely seen, and when it does attend the disease it generally succeeds the mental affection which is the reverse in hypochondriasis. It is said that these two diseases occasionally degenerate into each other and hence there must arise some difficulty in forming a correct diagnosis, particularly from the symptoms which arise from the depraved state of the mind; it is however conceded that in this case it is unimportant as the treatment in either case is nearly the same.

Prognosis. We have no specific signs by which we are enabled to judge of the duration or

termination of this disease; it is however when recent to be regarded as rather troublesome than dangerous, but if long continued it is said to be apt to terminate in schirrhi of the viscera, cachexy, dropsy, incurable melancholy or madness. — In the dissection of hypochondriacs some of the abdominal viscera are generally found to be enlarged, and occasionally there is effusion and turgescence of the vessels of the brain.

Treatment. We come now to by far the most important division of our subject, and for a correct knowledge of which all our other enquiries concerning the disease are but auxiliary; to cure a disease of any kind is not only the most important knowledge a physician can possess but also the most difficult to attain, and when attained equally difficult to reduce to

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successful practice. The indications of cure in hypochondriasis are different from almost any other disease in as much as we have to encounter not only a variety of corporeal derangements, but also to contend with a most obstinate alienation of the mind; these are the two grand landmarks by which we are to direct our practice in the cure of this disease. It is said that as this affection is purely a sympathetic disease, we have only to reinstate the stomach in its healthy action, and the erroneous perceptions and false ideas of the patient will instantly vanish; there is no doubt we think but that the affections of the abdominal viscera claims our first and principal attention, but at the same time we think as auxiliary in the cure it would be wise to direct some attention to the mind, namely by presenting to the patient a variety of new

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and interesting circumstances connected by a natural chain of association. thus gradually weakening the deranged and morbid concatination of ideas.
To cure any disease we must necessarily first enquire into the remote causes, which when ascertained are either to be removed or avoided: in this instance we have before noticed what are considered some of the most common of the remote causes, all of which require prompt removal;
Having thus checked the further influence of what we suppose the remote cause of the disease, we are then to endeavour to correct those symptoms which arise out of the morbid state of the stomach and alimentary canal, as well as of the organs lying in their vicinity, and suffering by sympathy in their derangement: it is ~~pro~~ many of these symptoms that we meet with a very

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thinking similarity between this disease and dyspepsia, yet the practice in some respects is quite different. The stomach which is the organ most generally affected, and which by its powerful influence on the neighbouring viscera may be productive of many of the attending symptoms, first attracts and demands our attention. From the slow evacuation of the stomach in this disease, we often meet with acidity, and a collection of crudities in this viscus, and as a consequence we have flatulency, eructation, heartburn and the like; to remove these symptoms, absorbents, alkalies and the like have generally been given, but more latterly emetics have been advised, or mercury to a slight salivation. The use of emetics in hypochondriacs is appears to have been noticed by some of the older writers, for we find that Cheyne strongly insisted on the use of such medicines as thoroughly cleansed out the stomach, but repeated vomits in

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particular; in conclusion he says that these medicines answer all the purposes which a man of experience and philosophy, and one acquainted with the animal economy can expect in such diseases in their first stages. Of the two opinions whether vomiting be correct or not in this disease we venture to affirm the former, limited however to certain cases; in this disease we believe the stomach to be for the most part enfeebled in consequence of a continued irritation of its mucous surface, and if with this state of the stomach the tongue be dry or furred or morbidly red, the epigastrium tender on pressure and the skin unequally hot and flushed - emetics by irritating still more the lining membrane of the stomach, will certainly aggravate the disease; but emetics given in the very commencement of the disease, before the symptoms have become so aggravated, with a view to their attractive effects I think must be useful.

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Owing to the intimate connection between the stomach and other portions of the alimentary canal we often have costiveness as an attendant on the disease to a considerable extent; this as it tends to keep up irritation is to be removed by soliciting evacuations daily at stated hours. or by some gentle laxative, or perhaps better by an injection. From the great sympathy between the stomach and liver, the hepatic functions are often performed with great torpor and inactivity in this disease: when this state of the liver does prevail, its removal constitutes an important part in the treatment, in as much as the remedies calculated to remove the dyspeptic symptoms will afford but a very slight alleviation of the symptoms so long as the liver is out of order; To meet this indication the most useful remedy consists in maintaining a gentle operation upon the bowels by means of mild mercurial preparations proportioned to the greater or less degree of torpor of the

alimentary canal. Having now removed the gastric symptoms, reinstated the bowels in their healthy action, and restored the healthy functions of the liver, we think the best half of the cure is finished. It has been thought that there was actually a loss of tone in the stomach in hypochondriasis and that tonics were consequently a most important class of medicines in its treatment; Cullen with others prescribed the use of tonics in this disease, believing that there was in reality not a direct loss of tone, but a want of activity only that is to be remedied. According to the notions which I have formed relative to the pathology of this disease tonics are inadmissible; and in their place the following plan of treatment at this stage is thought preferable; ~~every~~ thing calculated to stimulate the stomach and bowels is to be avoided, and by food light and nutritious endeavour to restore the stomach to its natural healthy functional exercise; and as a assistant the use

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of chalybeate Waters, tepid bathing, and friction of the whole body with coarse flannel cloths are strongly recommended.

To conclude, we most sedulously advise the withholding of all strong or morbid stimuli from the nervous system, whether they act on the external senses or the mind; but at the same time to insist on the enjoyment of the natural stimuli; as to the circulation by exercise; to the respiration by pure air of a moderate temperature; to the skin by comfortable clothing; to the sight by the varied colours of nature's livery; to the hearing by the harmony of poetry and song; and to the brain or mind by awakening pleasurable recollections and holding out the bland allurements of hope. ——

Finis.